



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\\$)	\$360
--------------------------------	--------------	--------------

Complete if Known

Application Number	10/764,322
Filing Date	1/22/2004
First Named Inventor	Beller
Examiner Name	Fletcher
Art Unit	2837
Attorney Docket No.	SEY-004

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 50-3592 Deposit Account Name: RONALD CRAIG FISH, LAW

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Small Entity</u>
12	- 20 or HP = 0	x 0	= 0	50	25
HP = highest number of total claims paid for, if greater than 20.				200	100
Indep. Claims	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	360	180
8	- 3 or HP = 3	x 300	= 300		
HP = highest number of independent claims paid for, if greater than 3.					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
100	- 100 = 0	/ 50 = 0 (round up to a whole number)	x 125	= 0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): one month extension of time small entityFees Paid (\$)\$60**SUBMITTED BY**

Signature	<u>Ronald C. Fish</u>	Registration No. (Attorney/Agent) 28,843	Telephone 408 866 4777
Name (Print/Type)	RONALD CRAIG FISH		Date 10/27/05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Art Unit: 2837
Beller Examiner: Fletcher

Serial No. 10/764,322 Docket No. SEY-004

Filed: 1/22/2004

For: HUMCANCELLINGELECTROMAGNETICPICKUPFORSTRINGEDMUSICALINSTRUMENTS
WITHTONALCHARACTERISTICSOFSINGLECOILPICKUPS

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR EXTENSION OF TIME

Sir:

Applicant(s) request an extension of time as indicated below. Enclosed is the requisite fee which is calculated pursuant to 37 C.F.R. §§1.17(a-c) below:

	Small Entity	Large Entity
One month extension	<input type="checkbox"/> \$ 60.00	<input type="checkbox"/> \$120.00
Two month extension	<input type="checkbox"/> \$225.00	<input type="checkbox"/> \$450.00
Three month extension	<input type="checkbox"/> \$510.00	<input type="checkbox"/> \$1020.00

A check for \$60 is enclosed herewith representing the fee for a ONE month extension of time small entity.

The Commissioner is authorized to charge any additional fees necessary at any time to keep this case from becoming abandoned or credit any over payments to Deposit Account No. 50-3592.

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail, postage prepaid, in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 1, 2005 ^{rec'd}
(Date of Deposit)

Ronald c. Fish
Ronald Craig Fish, President
Ronald Craig Fish, a Law Corporation
Reg. No. 28,843

Respectfully submitted,

Ronald c. Fish
Ronald Craig Fish
Reg. No. 28,843
Attorney for Applicant(s)